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**UTILITY PATENT APPLICATION TRANSMITTAL**

(Only for new non-provisional applications under 37 CFR 1.53(b))

Attorney Docket No.	AUDIOPH1100		
Client Matter Number	105549-165647		
First Inventor or Application Identifier:	Kenton Michael Fuqua		
Title:	Apparatus, System And Method For Capturing Sound		
Express Mail Label No.:	EL617044231US		
<b>Application Elements</b> <small>(See MPEP chapter 600 concerning utility patent application contents)</small>		<b>ADDRESS TO:</b> Assistant Commissioner For Patents BOX PATENT APPLICATION Washington, D.C. 20231	
1. <input checked="" type="checkbox"/> Fee Transmittal Form <small>(Submit an original, &amp; duplicate for fee processing)</small> 2 <input checked="" type="checkbox"/> Applicant claims small entity status 3 <input checked="" type="checkbox"/> Specification [Total Pages <u>34</u> ] <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none"> <li>• Descriptive title of the Invention</li> <li>• Cross References to Related Applications</li> <li>• Statement Regarding Fed sponsored R&amp;D</li> <li>• Background of the Invention</li> <li>• Brief Summary of the Invention</li> <li>• Brief Description of the Drawings (<i>if filed</i>)</li> <li>• Detailed Description</li> <li>• Claim(s)</li> <li>• Abstract of the Disclosure</li> </ul> 4 <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total sheets <u>8</u> ] 5 <input checked="" type="checkbox"/> Oath or Declaration [Total Pages <u>2</u> ] <ul style="list-style-type: none"> <li>a <input checked="" type="checkbox"/> Newly executed (original or copy)</li> <li>b. <input type="checkbox"/> Copy from prior application (37 CFR 1.63(d))  <small>(for continuation/divisional with Box 17 completed)</small> <ul style="list-style-type: none"> <li>i. <input type="checkbox"/> Deletion of Inventor(s)  <small>Signed statement attached in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)</small></li> </ul> </li> </ul> 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table, or Computer Program (Appendix) 8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small> <ul style="list-style-type: none"> <li>a <input type="checkbox"/> Computer Readable Form (CRF)</li> <li>b. <input type="checkbox"/> Specification Sequence Listing on:           <ul style="list-style-type: none"> <li>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies), or</li> <li>ii. <input type="checkbox"/> paper</li> </ul> </li> <li>c. <input type="checkbox"/> Statement verifying identity of above copies</li> </ul> <b>ACCOMPANYING APPLICATION PARTS</b> <ul style="list-style-type: none"> <li>9. <input type="checkbox"/> Assignment Papers (cover sheet &amp; document(s))</li> <li>10. <input type="checkbox"/> 37 CFR 3 73(b) Statement <input type="checkbox"/> Power Of Attorney (<i>when there is an assignee</i>)</li> <li>11. <input type="checkbox"/> English Translation Document (if applicable)</li> <li>12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS/PTO 1449) <input checked="" type="checkbox"/> Copies of IDS Citations</li> <li>13. <input type="checkbox"/> Preliminary Amendment (<u>  </u> pgs.)</li> <li>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (<i>Should be specifically itemized</i>)</li> <li>15. <input type="checkbox"/> Certified Copy of Priority Document(s) (<i>if foreign priority is claimed</i>)</li> <li>16. <input checked="" type="checkbox"/> Express Mail Certification</li> <li>17. <input type="checkbox"/> Request And Certification under 35 USC 122(b)(2)(B)(i)  <small>Applicant must attach form PTO/SB/35 or its equivalent</small></li> <li>18. <input checked="" type="checkbox"/> OTHER: Check # 497117 (\$841.00) &amp; Appendix A (50 pgs)</li> </ul>	
17 If a CONTINUING APPLICATION, check appropriate box and supply the requisite information: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-In-Part of prior application no.: <u>  /  </u> <small>Prior application information. Examiner: _____ Group/Art Unit: _____</small>			
<b>18. CORRESPONDENCE ADDRESS</b>			
<input checked="" type="checkbox"/> Customer Number (25548) Or Bar Code Label OR <input type="checkbox"/> Correspondence Address Below		<div style="border: 1px solid black; height: 40px; width: 100%;"></div>	
NAME <b>GRAY CARY WARE &amp; FREIDENRICH</b>			
ADDRESS 4365 Executive Drive, Suite 1100 San Diego, CA 92121-2133			
Direct Telephone: 858/638-6747		Patent Group Fax No.: 858/638-6727	
Name (print/type)	CHARLES D. GAVRILOVICH, JR.	Registration No.: (Attorney/Agent)	41,038
Signature			Date
			January 3, 2002

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## FEE TRANSMITTAL

Attorney Docket No.	AUDIOPH1100
First Named Inventor:	Fuqua
Application Number	Unknown
Filing Date:	Herewith
Examiner Name:	Unknown
Group/Art Unit:	Unknown

<b>TOTAL AMOUNT OF PAYMENT:</b>	<b>\$841.00</b>
<b>METHOD OF PAYMENT (check One)</b>	1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and/or credit any over payment to:  Deposit Account No : 07-1895 Deposit Account Name: GRAY CARY WARE & FREIDENRICH  <input checked="" type="checkbox"/> Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17  2. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other

### 2. UTILITY Basic Filing Fee & Claims

(1) For	(2) No. filed	(3) No. extra	(4) Large Entity	(5) Small Entity	(6) Calculations
Basic Filing Fee	XX	XX	\$ 740.00	\$ 370.00	\$ 370.00
Total Claims	63 - 20 =	43	X \$ 18.00	X \$ 9.00	\$ 387.00
Independent Claims	5 - 3 =	2	X \$ 84.00	X \$ 42.00	\$ 84.00
Multiple Dependent Claim(s) (if applicable)			\$ 280.00	\$ 140.00	\$ 000.00
<b>Total of above Calculations =</b>					<b>\$ 841.00</b>

Basic Filing Fee	Large Entity	Small Entity	Total
Design filing fee	\$ 330.00	\$ 165.00	\$ 000.00
Reissue filing fee	\$ 740.00	\$ 370.00	\$ 0.00
Provisional filing fee	\$ 160.00	\$ 80.00	\$ 0.00
<b>Total of above Calculations =</b>			<b>\$</b>

### 3. ADDITIONAL FEES

Fee Description	Large Entity	Small Entity	Other
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
<b>TOTAL:</b>			<b>\$</b>

Name (print/type)	CHARLES D. GAVRILOVICH, JR.	Registration No.: (Attorney/Agent)	41,031
Signature		Date	January 3, 2002

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DATE OF DEPOSIT: January 3, 2002

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Marcia Whittier

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